

## ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

**St Mary Medical Center Hobart**

City: Hobart County: Lake Year: 2004

Provider Type: General Acute Hospital

<b>I. Inpatient Care</b>				
<b>Hospital Service Description</b>	<b>Number of Set Up Beds</b>	<b>Number of Discharges</b>	<b>Number of Patient Days</b>	<b>Average Charge Per Discharge</b>
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	12	198	2,950	\$12,685
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	129	6,710	32,990	\$1,998
Neonatal Intermed	0	0	0	\$0
Obstetrics	6	416	996	\$3,238
Pediatric	9	356	598	\$808

Psychiatric	0	0	0	\$0
Rehabilitation	20	528	5,468	\$8,093
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	176	8,208	43,002	NA
Normal Newborn	0	0	0	\$0

<b>II. Outpatient Visits</b>			
Circulatory System	6,578	Digestive System	2,386
Endocrine System	7,225	Injuries and Poison	9,266
Mental Disorder	554	Musculoskeletal	9,082
Neoplasms	2,931	Nervous	1,961
Respiratory	4,069	Urinary	6,482
Other/Unknown	36,301	Total Visits	86,835
Number of Visits to Emergency Department			21,006
Percent of Emergency Department Visits of Total Visits			24.2%

## Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	N - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractic Service
Y - CT Scanner	N - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
Y - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	N - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Ophthalmic Surgery	N - Optometric Service	N - Organ Bank
N - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	N - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	Y - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	Y- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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